

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS           | ID NO.  | DATE    |
|---------------------------|--------------------|---------|---------|
| FEE DETERMINATION         | VILK T. J. 10-1-01 |         | 10-1-01 |
| O.I.P.E. CLASSIFIER       |                    | 10      | 10-1-01 |
| FORMALITY REVIEW          | AAH                | 10-1-01 | 10-1-01 |
| RESPONSE FORMALITY REVIEW | HZ                 | 719     | 10-1-01 |

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 0 ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

| Claim | Date |
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BEST AVAILABLE COPY

513  
10-01-01

If more than 150 claims or 10 actions  
 staple additional sheet here

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